

FEC FORM 9**24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR
ELECTIONEERING COMMUNICATIONS****1. Person Making the Disbursements/Obligations**

(a) Name

Gerald John Jennings II(b) Address (number and street) ☐ check if different than previously reported
10522 w.106th ct.

(c) City, State and ZIP Code

Westminster

CO

80021

(d) Name of Employer or Principal Place of Business

Carpenters Union

(e) Occupation

Union Carpenter

2. FEC Identification Number**C** C30002331**3. Is This Statement****New**

or

**Amended****4. Covering Period**M M M / D D D / Y Y Y Y Y Y
06 / 16 / 2015

through

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2024**5. (a) Date of Public Distribution(s)**M M M / D D D / Y Y Y Y Y Y
06 / 21 / 2015**(b) Communication Title** Nation builder**6. The filer is a(n):** (a) ☒ Individual (b) ☐ Unincorporated Organization (c) ☐ Qualified Nonprofit Corporation (11 CFR 114.10)(d) ☐ Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15(e) ☐ Other, specify: _____**7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account?**Yes ☒No ☐**8. Custodian of Records**

(a) Name

Gerald John Jennings II

(b) Address (number and street)

10522 w.106th ct.

(c) City, State and ZIP Code

Westminster

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9. Total Donations This Statement

.00

10. Total Disbursements/Obligations This Statement

10.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Gerald John Jennings II

SIGNATURE

Gerald John Jennings II

[Electronically Filed]

DATE

06/21/2015

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §437g.